SEPA. Notification (Hazardous Waste Site Aug 12 188)

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Form Approved OMB No. 2000-0138 EPA Form 8900-1

United States Environmental Protection Agency Washington DC 20460

This initial notification information is Please type or print in ink. If you need required by Section 103(c) of the Compreadditional space, use separate sheets of MAY hensive Environmental Response, Compenpaper. Indicate the letter of the item sation, and Liability Act of 1980 and must which applies. be mailed by June 9, 1981. Person Required to Notify: Enter the name and address of the person or organization required to notify. Box 62A Site Location: Solitions SERVICE COMPANY Enter the common name (if known) and actual location of the site. Box 357 Count CHAM JAIGN State Iz Zip Code 6 1897 1LD000672592 Person to Contact: Name (Last, First and Title) CHARLES BARRY VILVEN (MAN Enter the name, title (if applicable), and business telephone number of the person to contact regarding information submitted on this form, **Dates of Waste Handling:** STORAGE ONLY Enter the years that you estimate waste From (Year) 1966 To (Year) 1981 treatment, storage, or disposal began and ended at the site. Waste Type: Choose the option you prefer to complete Option 2: This option is available to persons familiar with the Option I: Select general waste types and source categories. If Resource Conservation and Recovery Act (RCRA) Section 3001 you do not know the general waste types or sources, you are encouraged to describe the site in Item I-Description of Site. regulations (40 CFR Part 261). **General Type of Waste:** Place an X in the appropriate Source of Waste: Specific Type of Waste: EPA has assigned a four-digit number to each hazardous waste Place an X in the appropriate listed in the regulations under Section 3001 of RCRA. Enter the boxes. The categories listed boxes. appropriate four-digit number in the boxes provided. A copy of overlap. Check each applicable the list of hazardous wastes and codes can be obtained by category. contacting the EPA Region serving the State in which the site is 1. Organics 1.
Mining 2. Inorganics 2.

Construction 3.

Textiles 3. ☐ Solvents 4. M Pesticides 4. Fertilizer 5.

Heavy metals 5. □ Paper/Printing 6. Acids 6.

Leather Tanning 7.
Bases 7. Iron/Steel Foundry 8.
PCBs 8. F Chemical, General 9.

Mixed Municipal Waste 9. □ Plating/Polishing 10.
Military/Ammunition 10.
Unknown 11. ☐ Other (Specify) 11.

Electrical Conductors DO NOT WASTE SELL TO 12.

Transformers 000001 NAY -4 81 FARMERS FOR MENT 13. Utility Companies THEIR FACENIA GOERATIONS 14. | Sanitary/Refuse FOR FIELD CROPS 15.

Photofinish EPA Region 5 Records Ctr. 16. ☐ Lab/Hospital 17. Unknown 18. ☐ Other (Specify) 354694

	Notification of Hazardous Waste Cite	Side Two	•	
F	Waste Quantity:	Facility Type	Total Facility Was	te Amount
	Place an X in the appropriate boxes to indicate the facility types found at the site. In the "total facility waste amount!" space give the estimated combined quantity (volume) of hazardous wastes at the site	1. ☐ Piles 2. ☐ Land Treatment	cubic feet	
		3. □ Landfill	gallons	
		4. ☐ Tanks	Total Facility Area	
	using cubic feet or gallons.	5. 🗆 Impoundment	square feet	
	In the "total facility area" space, give the estimated area size which the facilities	6. □ Underground Injection7. □ Drums, Above Ground		
	occupy using square feet or acres.	8. Drums, Below Ground	acres	
		9. Other (Specify) North		
G	Known, Suspected or Likely Releases to the Environment:			
	Place an X in the appropriate boxes to indicate any known, suspected, or likely releases of wastes to the environment.		☐ Known ☑ Suspec	ted Likely None
	Note: Items Hand I are optional. Completing these items will assist EPA and State and local governments in locating and assessing hazardous waste sites. Although completing the items is not required, you are encouraged to do so.			
H Sketch Map of Site Location: (Optional)				
	Sketch a map showing streets, highways, routes or other prominent landmarks near the site. Place an X on the map to indicate the site location. Draw an arrow showing the direction north. You may substitute a publishing map showing the site location.			
<u> </u>	Description of Site: (Optional)			
•	Describe the history and present conditions of the site. Give directions to			
	the site and describe any nearby wells, springs, lakes, or housing. Include such information as how waste was disposed and where the waste came from. Provide any other information or comments which may help describe the site conditions.			
	may not processing and one continuence			
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1	Signature and Title:			
J	The person or authorized representative (such as plant managers, superintendents, trustees or attorneys) of persons required to notify must sign the form and provide a mailing address (if different than address in item A). For other persons providing	Name SARRY VILVEN		 □ Owner, Present □ Owner, Past □ Transporter
		Street Box 37		
		City_RoyAUState	LL Zip Code 61897	■ Operator, Present
	notification, the signature is optional. Check the boxes which best describe the	n /2 1/11	i	☐ Operator, Past☐ Other
	relationship to the site of the person required to notify. If you are not required to notify check "Other".	Signature Correction of the Signature Control	Date 1 26 8 1	